

**REQUEST FOR TESTING
WRHA Francophone Health**

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| **Instructions:** Complete one form for each candidate being tested. Email form to Francophone Health at **FLS@wrha.mb.ca** Please complete all sections. Incomplete requests will not be processed. |
| **Hiring Manager:**      **Program/Department/Service:**      **Email:**        |
| **HR Consultant:**      **Telephone:**      **Email:**       | **HR Assistant:**      **Telephone:**      **Email:**       |
| **Candidate Name:**      **Position title being interviewed for:**       **Permanent Position:** [ ]  **Yes** [ ] **No EFT:**       **Position No.:**      **Email:**      **Telephone:**       **Name of prior incumbent:**       |
| **NOTE: This section to be completed by WRHA Francophone Health** |
| [ ]  **Speaking** Level required: [ ]  **Written expression (writing)** Level required:  | [ ]  **Listening** Level required: [ ]  **Reading comprehension (reading)** Level required:  |
| **NOTE: Test results will be emailed to Human Resources and the Hiring manager.** |
| **Questions – Call or Email****Francophone Health Coordinators****Angèle Matyi – 431-276-8730 Lise Alcock – 431-276-8752** **amatyi@wrha.mb.ca****lalcock@wrha.mb.ca** |